

Regular Bond

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14

Hugh Alison

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will settle and  
overlook it under

# Regular Gout

The opportunities which  
the medical student enjoys of obtaining prac-  
tical information on the disease which I have  
chosen as the subject of this dissertation;  
and the consequent difficulty of presenting to  
experienced practitioners, any improvement  
in the history, pathology, or treatment, so ve-  
ry great, that in offering this for your in-  
spection I must rely on your generosity for

2

those indulgences which are due to youth  
and inexperience.

In the catalogue of diseases to which the votaries of high life are peculiarly liable, there is none of more frequent occurrence or more distressing in its effects than gout; it debars the unhappy victim the enjoyment of those pleasures which appear to constitute the sole object of his existence and leaves him a prey to the ravages of a disease induced by his own or a parents excesses. All writers on this subject have concurred in the opinion that this disease is hereditary except Dr Brown who ridicules the idea; he says, a taint transmitted from father to son and celebrated under the title of hereditary, is a mere tale; that the rich mans son inherits the disease with the estate; and that those who

we excluded from the estate escape the disease; but we have too many instances of the extensive influence of Gout in some families continuing through several generations to credit Dr B's assertion or even admit a doubt of the fact.

Hereditary predisposition consists in the propagation of a similar temperament from father to son rendering him a fit subject for the disease and requiring less force in the exciting causes to induce it; it does not however follow that the son of a gouty parent must be affected; he may evade the disease by avoiding the exciting causes.

Dr Rush says this predisposition frequently passes by one generation and appears in the next, but because the disease did not make its appearance in the intermediate generation; are we to

conclude that no predisposition exists  
can we for a moment suppose that a child  
can inherit a disease from a parent who  
was not diseased; if the parent was free  
from all predisposition and propagated  
a similar temperament to his son it  
follows of course that the son must be equally  
as free from all hereditary predisposition as  
the father. If we break the link which con-  
nects the grandfather and grandchild in the  
Father; we destroy all connection between  
them, and render absolutely impossible for  
the grandchild to be hereditarily diseased.

That Gout and Scrofula sometimes  
passes by one generation and appear in the  
next is a fact well ascertained; where this  
circumstance occurs I think it can be better  
accounted for, by supposing that the predis-  
position exists but that the exciting cau-  
ses are wanting to produce the disease;

that the predisposition remains dormant  
in the system until called into action  
by the exciting causes.

It not unfrequently  
happens that one child of a gouty pa-  
rent is affected while the other is not  
in this case we have every reason to believe  
them both predisposed being born of the  
same parents and subject to the same he-  
reditary affections yet we see the one en-  
joying the blessing of undisturbed health  
while the other is writhing with anguish  
under the curse of hereditary disease; these  
cases are very analogous and may both be  
attributed to the absence of exciting causes: it  
also appears to me that this predisposition  
is so modified by different constitutions as  
to require exciting causes adapted to consti-  
tutional peculiarities to produce the dis-  
ease.

It has long been a generally received opinion that the male sex was more liable to that disease than the female, Dr Rush says he once believed and taught the same but that he was convinced that it occurred most frequently in females though from the thin covering which they wear on their feet it seldom appears in those parts, Dr Caldwell appears to be of the same opinion in his notes to Cullen's first lines he observes what would be regular Podagra in men is Histria; sick head ache, colic or some anomalous complaint in women Had regular Podagra never appeared in women we might suppose the female constitution susceptible of the disease in those forms but since it has I do not think we are warranted in terming every disease Cont which originates in or is connected with the stomach besides the analogy between the two is not very strong considerable difference exists

ting between them for although they may have the same causes the one is the result of the action of these causes continued for years whereas the others are merely transient affections. Hysteria is most frequently the result of some violent passion or emotion. Yet it is a regularly established diseased action in the system appearing in regular paroxysms late in life and increasing with age, attacking persons of robust constitutions and copulent habits. On the other hand hysteria appears early in life decreasing as age increases and attacking women of delicate constitutions induced with extreme sensibility custom and necessity prohibit women and the poor those indulgences in eating and drinking which prove the most frequent causes of the disease.

All those causes of disease which act either directly or indirectly on the stomach may

be considered as remote causes of Gout such as intemperance gluttony sedentary habits indolence indigestion &c

A paroxysm of Gout is most frequently preceded by sour eructations flatulence indigestion depraved appetite nausea strong sensation of internal heat obstinate constipation or lozenges of the bowels, these symptoms occur several days and sometimes a week previous to the paroxysm. The paroxysm consists in an inflammatory affection of one of the joints most frequently the great toe attended with pain so violent as to be compared by Dr Rush to the gnawing of a dog. The local symptoms which precede it are unusual coldness of the feet and legs numbness and sense of prickling in the lower extremities, cramps in the muscles of the leg

The paroxysms generally come on in the  
spring of the year early or late according  
to the vicissitudes of the weather and  
the exposure of the patient. It commences  
with pain in the joint attended with  
cold shivering which ceases as the pain  
increases and is succeeded by a hot stage  
of pustula which continues as long as the  
pain going through all the stages of a  
regular paroxysm of intermittent fever  
and finally terminates in a gentle sweat  
leaving the limb red and considerably  
swollen. After an attack of this kind the  
patient is liable to slight attacks every  
evening for several days diminishing in  
violence until the disease gradually dis-  
appears leaving the patient in better  
health than he had previously enjoyed.  
In the commencement of the disease the  
paroxysms do not return oftener than

once in two or three years but as the disease progresses they become annual semiannual & each succeeding paroxysm increasing in length until at last the paroxysms are so long and the intervals so short that the patient scarcely enjoys a moments intermission.

At first one foot only is affected then every paroxysm affects both feet one after the other and as the disease continues to recur affects both feet at once. It sometimes affects the larger joints of the upper and lower extremities. At first the use of the joint is easily recovered after the paroxysm but it becomes more difficult in proportion to the frequency of the returns until their motion is entirely lost. Chalky concretions are sometimes found on the outside of the joints; by chemical analysis these concretions are found

to be similar to those found in the bladder. The similarity between Gout and Lithiasis is not confined to this circumstance alone they also originate from the same causes and depend upon a depraved state of the alimentary canal. The knowledge of this analogy does not appear to have influenced the practice or to have thrown much light on the pathology of either disease. Such is the history of the disease given by Delullen and other writers and we can not but regret that their knowledge did not extend to the pathology of the disease with the same degree of correctness.

From the earliest ages of medicine attempts have been made to investigate the proximate cause of this disease, the theories on the subject have been numerous but whether from the revolutions in medicine or their own futility none have

withstood the test of time and this part of the subject is still enveloped by the clouds of ignorance.

I shall mention a few of these theories and the objections to them.

One of the most ancient opinions was that Gout depended upon a certain morbid matter always present in the body which by certain causes was thrown upon the joints and produced the disease. The first objection which presents itself to this theory is that if this morbid matter is always present in the body it must exist in the healthy state and the existence of morbid matter in a healthy state of the system is inconsistent with the animal economy. Besides we have no proof of its existence and the opinions of its nature are so various as to render its existence doubtful even if we had no

other reason.

The next is that a peculiar saline acrimony in the blood existing in such proportion as to irritate and excite a morbid action in the terminations of the arteries in certain parts of the body to be the proximate cause of Gout.

This saline acrimony has never been detected in the blood we are not therefore obliged to believe in its existence: and if it did exist its action would not be partial, confined to one part, but general and extensive as the surface upon which it acts not attacking the most insensible parts of the body but rather confining its action to parts most sensible.

Dr Darwin supposed the proximate cause to be irritability or defective irritation of some part of the system producing torpor and inflammation he also thinks

its most frequent primary seat to be the liver and the affection of the other parts of the system to be sympathetic associated and accounts for the morbid affection of the stomach previous to a paroxysm by the termination of the biliary duct in the duodenum.

Among the many objections which may be made to this theory it will be sufficient to observe that the symptoms of indigestion and other phenomena of the disease can be accounted for much easier and without resorting to retrograde motion. With this I shall dismiss Dr Darwin's theory and proceed to make a few observations on that of Dr Cullen, he says in some persons there is a certain vigorous and plethoric state of the system which at a certain period of life is liable to a loss of tone in the extremities, this is in some mea-

sue communicated to the whole system  
but more especially to the stomach when  
this occurs while the energy of the brain  
still retains its vigour the vis medicatrix  
nature is excited to restore the tone of  
the parts by exciting an inflammatory af-  
fection in some part of the extremities  
when this has subsisted for some days the  
tone of the extremities and of the whole  
system is restored and the patient returns  
to his ordinary state of health.

This theory is altogether vague and un-  
telligible. In the first place he commen-  
ces with an unsupported assertion which  
I do not pretend to understand, in the  
second he evidently mistakes the cause  
for the effect when he makes the sto-  
mach the secondary seat of the disease  
and the loss of tone in the extremities  
the cause of its morbid affection; and

lastly he does not explain in what manner an inflammation of the great toe restores tone to the extremities and health to the whole system.

There are many other theories but I do not think it necessary to mention them.

Gout in its early stage is evidently seated in the stomach and thro' the medium of that organ it becomes a disease of the whole system.

By what means it is thrown upon the extremities it is impossible for us in the present state of medicine to ascertain, and I do not know whether the knowledge would be of any great practical importance for if we consider the disease as originating and existing in a disordered state of the stomach the indications of treatment are sufficiently clear, and could not be influenced by such know-

ledge which circumstance alone could render the investigation important or interesting.

To be convinced that gout originates and is seated in the stomach, it appears to me only necessary to reflect on the causes, symptoms, and cure of the disease, and those particularly which have induced me to adopt this opinion. I will endeavour to state clearly and concisely

1<sup>st</sup> All the exciting causes of Gout, act either directly, or indirectly, on the stomach. the majority of them directly, the rest indirectly, consequently the first diseased impression is made upon that organ.

2<sup>nd</sup> The disease does not make its appearance until a late period of life, when the exciting causes <sup>have</sup> had sufficient time to act in destroying the tone of the stomach. The high seasoned food and wine.

of the luxurious daily calling on the Stomach for supernatural efforts in digesting its contents impairs its powers gradually undermines it, and the patient finally sinks a victim to gluttony, and intemperance.

3<sup>d</sup> The symptoms of indigestion which most frequently precede a paroxysm of Gout clearly indicate a disordered and deprived state of the Alimentary Canal

4<sup>b</sup> Paroxysms of Gout are sometimes arrested in their career by violent passions or emotions of the mind; there is no part of the human body which has so intimate a connection with the mind as the stomach, so great is the sympathy existing between them, that in affecting the one, we necessarily affect the other, this is sufficiently evinced in all the diseases of the stomach.

and alimentary Canal, particularly in Dyspepsia, Hypochondriasis &c. and the influence of the mind on the stomach by the very idea of an emetic creating nausea, and in some persons even vomiting. The manner in which the passions act in removing a paroxysm of Gout I suppose to be as follows. A violent fit of rage or anger acting on the stomach thro' the medium of the mind stimulates it to an action which being greater than the diseased action supersedes it and removes the disease.

If we do not admit that Gout is seated in the stomach, in what manner can we account for its removal by the above causes, or what effect can a passion of the mind have on a disease seated in the extremities.  
Lastly. In all those cases where cures of

disease have been performed they were effected by such measures as are peculiarly calculated to restore health and tone to the stomach.

Having rendered it highly probable that the stomach is the primary seat of the disease I shall next make a few remarks on the most probable means of effecting a permanent cure.

The impracticability of effecting a radical cure in Gout, appears to depend less upon the incurable nature of the disease, than upon the unwillingness of those afflicted with it to submit to a proper regimen. Occurring most frequently in men accustomed to high living, and the unlimited indulgence in wine, and spe-

rituous liquors, and to whom habit has rendered these indulgences, almost necessary to existence, they suffer indurine all the pain, and all the inconvenience of the disease, to the relinquishment of these dear sought pleasures; even sydenham himself who well knew the efficacy and absolute necessity of abstinence from spirituous liquors in the cure of this disease had not sufficient resolution to follow his own prescription and fell a victim to the disease under such circumstances the disease can only be palliated a radical cure is impossible, it is beyond the powers of medicine to remove a disease without first removing the cause.

Having under these circumstances resisted the efforts of regular practice, it became the object of empirics who regardless of impossibilities have invented

enumerable nostrums which have alternately been celebrated as specifics in the cure of Gout. Desiring any remedy which held out the slightest prospect of advantage to the privation of long accustomed luxuries, the gouty patient becomes the dupe of a Quack, wasting his fortune and undermining his constitution in an awaiting of sorts to remove the disease by the attenuate use of this lengthy catalogue of supposed remedies.

.. not the least celebrated of these are the Portland powder and the Eau medicale the first of these is almost obsolete on account of the injury sustained by the constitution from its uses the last has maintained an undiminished reputation ever since its invention. Its efficacy is probably owing to its purgative property as Dr Chapman states that the most benefi

cial results invariably follow active purging  
in this disease.

Among other remedies which are  
calculated to relieve the paroxysm. Sir Ever-  
ard Home has lately introduced a new  
one. he states that a vinous infusion of  
the Colchicum autumnale injected into the  
veins of the ankle, or leg, will cure the  
most violent Gout; and that he relieved  
himself from a violent attack, in less than  
twenty four hours, by injecting into the cir-  
culation, sixty drops of this medicine. I shall  
not attempt to dispute the propriety of the  
practice of so great a medical man as Sir  
Everard Home nor investigate the modes  
operandi of the Medicine as that would lead  
to an useless discussion concerning the hu-  
man Pathology.

But these are medicines which only pal-  
iate the disease or relieve the paroxysms they

make no progress towards its permanent cure that is to be effected not so much by medicines as by a well regulated diet and course of life.

The first step towards this important end must be the removal of the exciting causes the patient must therefore abstain most strictly from the use of all wines, spirituous liquors and every article in eating.

Considering the disease as dependent upon a depraved and exhausted state of the stomach, and alimentary canal, the next step, must be to restore health, and strength, to the digestive organs, by proportioning the quality, and quantity, of food, to the powers of these organs, and by the administration of tonic medicines.

Exercise as absolutely requisite to the health of the stomach should

not be neglected. Labour and a spare diet without the use of medicines have frequently effected cures of this disease.

If the patient has sufficient fortitude to renounce his luxuries and adhere to these general rules, he may look forward to a complete restoration of his health, if not he must inevitably sink under the repeated attacks of a painful and distressing disease. ~









